

CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schmitz OFFICE SOUGHT: Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
11	SIGN <u>[Signature]</u> PRINT <u>Walter Stevenson</u>	RESIDENCE <u>214</u> CITY/TOWN <u>[Signature]</u>	4/9/16	
12	SIGN <u>[Signature]</u> PRINT <u>Karen H. Call</u>	RESIDENCE <u>1719 J. W. R. Ave</u> CITY/TOWN <u>Richmond, VA 23227</u>	4/9/16	
13	SIGN <u>[Signature]</u> PRINT <u>Robert Bennett</u>	RESIDENCE <u>1719 J. W. R. Ave</u> CITY/TOWN <u>Richmond 23227</u>	4/9/16	
14	SIGN <u>ERIK SORENSEN</u> PRINT <u>Erik Sorenson</u>	RESIDENCE <u>3107 Grandland Dr</u> CITY/TOWN <u>Richmond, VA 23221</u>	April 10/16	
15	SIGN <u>Lawien Mark</u> PRINT <u>Lawien Mark</u>	RESIDENCE <u>921 N Boulevard</u> CITY/TOWN <u>Piedmont, VA</u>	April 10/16	
16	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>2923 Floyd Ave</u> CITY/TOWN <u>Richmond, VA</u>	4/10/16	
17	SIGN <u>[Signature]</u> PRINT <u>Edmond New</u>	RESIDENCE <u>3208 E Wood Ave Apt. C</u> CITY/TOWN <u>Richmond, VA 23221</u>	4/10/16	
18	SIGN <u>Brigitte Woeberly</u> PRINT <u>Brigitte Woeberly</u>	RESIDENCE <u>5413 Park Ave</u> CITY/TOWN <u>Rich, VA 23226</u>	4/10/16	
19	SIGN <u>[Signature]</u> PRINT <u>Lee McKison</u>	RESIDENCE <u>2415 Grove Avenue</u> CITY/TOWN <u>Richmond, VA</u>	4/10/16	2322C
20	SIGN <u>[Signature]</u> PRINT <u>Robert E Turner</u>	RESIDENCE <u>106 W. Lancaster Rd</u> CITY/TOWN <u>Richmond, VA 23222</u>	4/10/16	
21	SIGN <u>[Signature]</u> PRINT <u>SILVER PERSINGER</u>	RESIDENCE <u>1215 Williamsburg Ave.</u> CITY/TOWN <u>AVA 23231</u>	4/10/16	

Commonwealth of Virginia - AFFIDAVIT - T64252950

I, Alan Schmitz, swear or affirm that (i) my full residential address is 3321 Garland in the State/Commonwealth of VA; (ii) I am a legal resident of Richmond in the County/City/Town of Richmond; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I have personally witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

SIGNATURE OF PERSON CIRCULATING THE PETITION: [Signature]

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 10th day of April, 20 16, by Alan Schmitz

PRINT NAME OF PERSON CIRCULATING THE PETITION: Alan Schmitz

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE: VA

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE: 1193

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER:

Notary Public: Lisa Anne Cosby, Notary Public, Commonwealth of Virginia, Reg. #7527182, Commission Expires 11/30/2018

Privacy Notice: The Code of Virginia, §§ 24.2-508 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

If not included in seal stamp. SBE-506/521 REV 1.2013

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

Alan Schintzius

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland Ave

ENTER ABOVE, CITY/TOWN

Richmond Va

ENTER ABOVE, ZIP + 4

23222

ENTER ABOVE, OFFICE SOUGHT

MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office

It is suggested that you file petitions in each county to facilitate the processing of the filing. If you file the number of signatures by congressional district enter district no.: \_\_\_\_\_ [optional].

We, the qualified voters of the district in which the above candidate seeks nomination or election and of

Alan Schintzius

signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of NOV, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/him a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, IS NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECUR NUMBER (OPTIONAL)
1.	SIGN	[Signature]	RESIDENCE 1502 WENTWORTH	4/4/16	
	PRINT	MARIAM ROBAL	CITY/TOWN RICHMOND VA 23227		
2.	SIGN	[Signature]	RESIDENCE 307 N 22ND ST	4/4/16	
	PRINT	J.T. BLUNT	CITY/TOWN RICH VA 23223		
3.	SIGN	[Signature]	RESIDENCE 1800 COTTON	4/4/16	
	PRINT	J.P. BERTSCH	CITY/TOWN RICH VA 23220		
4.	SIGN	[Signature]	RESIDENCE 519 Catherine St.	4/6/16	
	PRINT	ANTHONY LOUIS BERTON	CITY/TOWN RICHMOND VA 23222		
5.	SIGN	[Signature]	RESIDENCE 1208 BROOKLAND PKWY	4/4/16	
	PRINT	MARY L CHANDLER	CITY/TOWN RICH VA 23227		
6.	SIGN	[Signature]	RESIDENCE 1915 W MAINTHUR	4/4/16	
	PRINT	CARIE M. HOOPER	CITY/TOWN RICHMOND VA 23227		
7.	SIGN	[Signature]	RESIDENCE 1418 W MARSHALL	4/4/16	
	PRINT	ALLISON CROOKS	CITY/TOWN RICHMOND VA 23220		
8.	SIGN	[Signature]	RESIDENCE 2039 W C.R. HEST	4/6/16	
	PRINT	ARTHUR WOODWARD	CITY/TOWN RICHMOND VA		
9.	SIGN	[Signature]	RESIDENCE 3430 Stuart Ave	04/09/16	
	PRINT	DAVID W BARTLETT	CITY/TOWN RICHMOND VA 23221		
10.	SIGN	[Signature]	RESIDENCE 4715 Polite Rd	4/4/16	
	PRINT	MARY HENDERSON	CITY/TOWN RICHMOND VA 23226		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintz OFFICE SOUGHT: Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>Carrie Barb</u> PRINT <u>Carrie Barbagallo</u>	RESIDENCE <u>1035 N Lombardy ST</u> CITY/TOWN <u>Richmond 23220</u>	<u>4/11/2016</u>	
12	SIGN <u>Kelly Callahan</u> PRINT <u>Kelly Callahan</u>	RESIDENCE <u>1035 N Lombardy St</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>4/11/2016</u>	
13	SIGN <u>Jack Johnson</u> PRINT <u>Jack Johnson</u>	RESIDENCE <u>7715 Turpin Ln</u> CITY/TOWN <u>Richmond, VA 23225</u>	<u>4/11/2016</u>	
14	SIGN <u>Carol Engle</u> PRINT <u>Carol Engle</u>	RESIDENCE <u>1608 Newman Rd</u> CITY/TOWN <u>Richmond VA 23231</u>	<u>4/11/16</u>	
15	SIGN <u>Kimberly Gray</u> PRINT <u>Kimberly Gray</u>	RESIDENCE <u>123 W Clay</u> CITY/TOWN <u>RVA 23220</u>	<u>4/11/16</u>	
16	SIGN <u>Kimberly Gray</u> PRINT <u>Kimberly Gray</u>	RESIDENCE <u>2305 East Broad</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/10/16</u>	
17	SIGN <u>Mickelle H Jones</u> PRINT <u>Mickelle H Jones</u>	RESIDENCE <u>2614 Benton Ave</u> CITY/TOWN <u>Richmond 23222</u>	<u>4/11</u>	
18	SIGN <u>Molly Hayes</u> PRINT <u>Molly Hayes</u>	RESIDENCE <u>1825 Floyd Ave</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>4/11</u>	
19	SIGN <u>Jennifer Sargent</u> PRINT <u>Jennifer Sargent</u>	RESIDENCE <u>1827 Floyd Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>4/11/16</u>	
20	SIGN <u>Angie Hunter</u> PRINT <u>Angie Hunter</u>	RESIDENCE <u>3434 Stuart Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>4/11/16</u>	
	SIGN <u>Sarah Anderson</u> PRINT <u>Sarah Anderson</u>	RESIDENCE <u>906 N 25th St</u> CITY/TOWN <u>Richmond VA</u>	<u>4/11/16</u>	

Commonwealth of Virginia

**AFFIDAVIT.**

I, Alan Schintz, swear or affirm that (i) my full residential address is 3371 Garland Ave in the State/Commonwealth of VA; in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
VA

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER  
493

CE PHOTOGRAPH - CALLY REPRODUCIBLE  
NOTARY SEAL STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this

10th day of April, 2016, by

Alan Schintz

PRINT NAME OF PERSON CIRCULATING THE PETITION

Lisa Anne Cosby  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7527182  
My Commission Expires 11/30/2018

PLACE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

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COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a state-wide office

It is suggested that you file petitions in counties to facilitate the processing of the filing. If you file the number of signatures by congressional district enter district no.: \_\_\_\_\_ (optional)

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)

Alan Schintz

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland Ave

ENTER ABOVE, CITY/TOWN

Richmond VA

ENTER ABOVE, ZIP + 4

23222

ENTER ABOVE, OFFICE SOUGHT

MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of

Alan Schintz

signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of April, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is neither a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

**CIRCULATOR:** MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE  
**SIGNER:** YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECUR NUMBER (optional)
P	1.	SIGN <i>[Signature]</i> PRINT GORDON WILSON	RESIDENCE 1305 GROVE HUE CITY/TOWN RICHMOND 23220	4/10/16	
P	2.	SIGN <i>[Signature]</i> PRINT Michael Keller	RESIDENCE 2229 W. 10th St CITY/TOWN Richmond VA 23220	4/10/16	
P	3.	SIGN <i>[Signature]</i> PRINT Bessie Wampole	RESIDENCE 1 E Marshall St CITY/TOWN Richmond 23219	4/10/16	
P	4.	SIGN <i>[Signature]</i> PRINT Meranda Lee	RESIDENCE 512 N 29th CITY/TOWN RVA 23225	4/10/16	
P	5.	SIGN <i>[Signature]</i> PRINT Laurel Deffenbaugh	RESIDENCE 1100 W + Blvd St CITY/TOWN Richmond 23220	4/10/16	
P	6.	SIGN <i>[Signature]</i> PRINT Mary Jones	RESIDENCE 2306 1st Ave CITY/TOWN	4/10/16	
P	7.	SIGN <i>[Signature]</i> PRINT Brian L. Fagan	RESIDENCE 11725 S. Briarfield Dr CITY/TOWN Midlothian VA 23117	4/10/16	
P	8.	SIGN <i>[Signature]</i> PRINT Julie Guild Smith	RESIDENCE 1100 Skypw. Dr CITY/TOWN Henric VA 23223	4/11/16	
P	9.	SIGN <i>[Signature]</i> PRINT MICHAEL O'NEIL	RESIDENCE 1320 N 38th St CITY/TOWN Richmond VA 23223	4/11/16	
P	10.	SIGN <i>[Signature]</i> PRINT MICHAEL O'NEIL	RESIDENCE 1320 N 38th St CITY/TOWN Richmond 23223	4/11/16	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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Alan Schintzius

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

[Must be filed with Declaration of Candidate]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statement of office

It is suggested that you file petitions in person to facilitate the processing of the filing. Also, the number of signatures by congressional district is indicated on the back of the petition.

We, the qualified voters of the district in which the above candidate seeks nomination or election and of which the above named individual is a resident, signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is hereby a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BE LAST 4 DIGIT SOCIAL SEC NUMBER (OPTIONAL)
1.	SIGN <i>Opheia Ann Mare</i> PRINT Opheia Ann Mare	RESIDENCE 1217 IRBY DR CITY/TOWN Richmond VA	5-22	
2.	SIGN <i>Mike Th...</i> PRINT	RESIDENCE CITY/TOWN		
3.	SIGN <i>Mary F Jones</i> PRINT Mary F Jones	RESIDENCE 1218 Irby Dr CITY/TOWN Richmond VA 23225	5-22	
4.	SIGN <i>Cynthia White</i> PRINT Cynthia White	RESIDENCE DOBOK 7102674524 CITY/TOWN Rich VA 23236	5/22	
5.	SIGN <i>Bronald Lewis</i> PRINT Bronald Lewis	RESIDENCE 1212 Irby DR CITY/TOWN Rich VA 23225	5/22	
6.	SIGN <i>Perry Yellow...</i> PRINT Perry Yellow...	RESIDENCE 1202 Irby DR CITY/TOWN Rich VA 23225	5/22/16	
7.	SIGN <i>William G...</i> PRINT William G...	RESIDENCE 1118 IRBY DR CITY/TOWN Richmond VA 23225	5/22	
8.	SIGN <i>Amey Hardin</i> PRINT Amey Hardin	RESIDENCE 1106 Irby Dr CITY/TOWN Richmond VA	5/22/16	
9.	SIGN <i>Theodore Brown</i> PRINT Theodore Brown	RESIDENCE 1101 Irby DR CITY/TOWN Richmond 23225	5/22	
10.	SIGN <i>Morin Hawley</i> PRINT Morin Hawley	RESIDENCE Richmond 23225 CITY/TOWN 5013300000000000	5/22	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

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11	SIGN <u>[Signature]</u> PRINT <u>VIRGINIA Castle</u>	RESIDENCE <u>55131 [unclear]</u> CITY/TOWN <u>Richmond 23225</u>	<u>5/22/16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>[unclear]</u>	RESIDENCE <u>1211 [unclear]</u> CITY/TOWN <u>Richmond 23225</u>	<u>5/22</u>	
13	SIGN <u>[Signature]</u> PRINT <u>Nicole Dawson</u>	RESIDENCE <u>1213 Keswick Lane</u> CITY/TOWN <u>Richmond, VA 23205</u>	<u>5/27/16</u>	
14	SIGN <u>[Signature]</u> PRINT <u>Naimah Murphy</u>	RESIDENCE <u>1236 Keswick Ln</u> CITY/TOWN <u>RVA 23225</u>	<u>5/22</u>	
15	SIGN <u>[Signature]</u> PRINT <u>Lana Estep</u>	RESIDENCE <u>1266 Keswick Ln</u> CITY/TOWN <u>Rich 23225</u>	<u>5/22</u>	
16	SIGN <u>[Signature]</u> PRINT <u>Russell A. Carr</u>	RESIDENCE <u>1314 IRBY DRIVE</u> CITY/TOWN <u>Rich 23225</u>	<u>5/22</u>	
17	SIGN <u>[Signature]</u> PRINT <u>VICKI KOLAR</u>	RESIDENCE <u>1319 IRBY DRIVE</u> CITY/TOWN <u>RICHMOND, VA 23225</u>	<u>5/22</u>	
18	SIGN <u>[Signature]</u> PRINT <u>Harvey N. N. N. N.</u>	RESIDENCE <u>1313 IRBY DR</u> CITY/TOWN <u>Rich 23225</u>	<u>5/22</u>	
19	SIGN <u>[Signature]</u> PRINT <u>Monique &amp; George Lade</u>	RESIDENCE <u>1313 IRBY DR</u> CITY/TOWN <u>Rich 23225</u>	<u>5/22</u>	<u>1 person checked for 2 names</u>
20	SIGN <u>[Signature]</u> PRINT <u>Stephen Davis</u>	RESIDENCE <u>1224 Irby Drive</u> CITY/TOWN <u>Richmond VA 23225</u>	<u>5/22</u>	
	SIGN <u>[Signature]</u> PRINT <u>Steve Young</u>	RESIDENCE <u>1217 Irby Dr</u> CITY/TOWN <u>Richmond 23225</u>	<u>5/22</u>	

Commonwealth of Virginia

- AFFIDAVIT -

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3371 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May 2016, by Alan Schintzius

PRINT NAME OF PERSON CIRCULATING THE PETITION

Princeton Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191

NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES 8/31/2018

any notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate using this petition with the official voter registration record. You are not required to provide this information and may sign the petition without it. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or partitioned.

Alan Schintzius

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidacy)

When an election board receives more than one petition for the same office in the same county or city, it is suggested that you file a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office, it is suggested that you file petitions in each county or city to facilitate the processing of the filing. Indicate the number of signatures by congressional district or by precinct (optional).

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary to be held on the 8th day of November, 20 16, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/his a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE RE LAST 4 DIGIT SOCIAL SEC NUMBER (OPTIONAL)
1.	SIGN <u>[Signature]</u> PRINT <u>SI WAT 101</u>	RESIDENCE <u>3335 Highland</u> CITY/TOWN <u>Richmond 23223</u>		
2.	SIGN <u>[Signature]</u> PRINT <u>Thomas Fitzpatrick</u>	RESIDENCE <u>411 1st St</u> CITY/TOWN <u>Richmond 23220</u>		
3.	SIGN <u>[Signature]</u> PRINT <u>Nicholas F. Kline</u>	RESIDENCE <u>326 Blithewood Dr</u> CITY/TOWN <u>Richmond</u>		
4.	SIGN <u>[Signature]</u> PRINT <u>MANUEL VASQUEZ</u>	RESIDENCE <u>6041 West 1st St</u> CITY/TOWN <u>Richmond 23225</u>		
5.	SIGN <u>[Signature]</u> PRINT <u>ROSEMARIE STUBER</u>	RESIDENCE <u>5 N ROBINSON</u> CITY/TOWN <u>Richmond</u>		
6.	SIGN <u>[Signature]</u> PRINT <u>Ann Marie Williams</u>	RESIDENCE <u>719 6th St</u> CITY/TOWN <u>Richmond 23222</u>		
7.	SIGN <u>[Signature]</u> PRINT <u>LIANA DONATO</u>	RESIDENCE <u>1809 1st St</u> CITY/TOWN <u>Richmond 23224</u>		
8.	SIGN <u>[Signature]</u> PRINT <u>Lynnette L. Williams</u>	RESIDENCE <u>2005 1st St</u> CITY/TOWN <u>Richmond 23223</u>		
9.	SIGN <u>[Signature]</u> PRINT <u>Katherine H. Shepherd</u>	RESIDENCE <u>521 1st St</u> CITY/TOWN <u>Richmond, VA 23224</u>		
10.	SIGN <u>[Signature]</u> PRINT <u>PETER M. HOLICA</u>	RESIDENCE <u>4015 Windsor Ave</u> CITY/TOWN <u>Richmond, VA 23225</u>		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON RE

\* Privacy notice: The Code of Virginia, §§ 24-2-506 and 24-2-521, authorizes requesting the last four digits of your social security number to check this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.



CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

FFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>C.D. DeRoche</u> PRINT <u>C.D. DeRoche</u>	RESIDENCE <u>715 A N. Main St</u> CITY/TOWN <u>Richmond VA 23220</u>	5/22/16	
12	SIGN <u>Kathryn Sprue</u> PRINT <u>KATHRYN SPRUE</u>	RESIDENCE <u>3206 BETHWOOD DR.</u> CITY/TOWN <u>Richmond VA 23220</u>	5/22/16	
13	SIGN <u>Kathleen VanPaasschen</u> PRINT <u>KATHLEEN VANPAASSCHEN</u>	RESIDENCE <u>3110 YUKON RD</u> CITY/TOWN <u>Richmond 23235</u>	5/22/16	
14	SIGN <u>Debbie Dell Dorn</u> PRINT <u>Debbie Dell Dorn</u>	RESIDENCE <u>2410 Grand Ave #3</u> CITY/TOWN <u>Richmond VA 23220</u>	5/22/16	
15	SIGN <u>Steven Sattberg</u> PRINT <u>Steve Sattberg</u>	RESIDENCE <u>3323 Haven Ave</u> CITY/TOWN <u>Richmond 23221</u>	5/22/16	
16	SIGN <u>Shula Chandler</u> PRINT <u>Shula Chandler</u>	RESIDENCE <u>3323 Haven Ave</u> CITY/TOWN <u>Richmond 23221</u>	5/22/16	
17	SIGN <u>Mariah Harris</u> PRINT <u>MARIAH HARRIS</u>	RESIDENCE <u>2927 Marlboro</u> CITY/TOWN <u>Richmond VA</u>	5/22/16	
18	SIGN <u>Theresa H. Warner</u> PRINT <u>Theresa H. Warner</u>	RESIDENCE <u>5818 Wilbur Ave</u> CITY/TOWN <u>Richmond 23228</u>	5/22/16	
19	SIGN <u>Patricia Largent</u> PRINT <u>PATRICIA LARGENT</u>	RESIDENCE <u>78076 HOLAD</u> CITY/TOWN <u>Richmond 23225</u>	5/22/16	
20	SIGN <u>Dawn Hentz</u> PRINT <u>Dawn Hentz</u>	RESIDENCE <u>3130 Borden Rd</u> CITY/TOWN <u>Richmond 23225</u>	5/22/16	
21	SIGN <u>Michael Heuler</u> PRINT <u>Michael Heuler</u>	RESIDENCE <u>3432 Bradley Hill</u> CITY/TOWN <u>Richmond VA 23225</u>	5/22/16	

Commonwealth of Virginia

**- AFFIDAVIT -**

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia; (ii) I am a legal resident of Richmond in the County/City/Town of Richmond; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I have personally witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

Alan Schintzius  
SIGNATURE OF PERSON CIRCULATING THE PETITION

PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May, 2016, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Princeton Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #2037194

NOTARY REGISTRATION NUMBER 2037194

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NOT REPRODUCED IN FULL

SBE-506/521 REV 1.2013

TV4752950

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER



**Alan Schintzius**

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, OFFICE SOUGHT  
 ENTER ABOVE, DISTRICT, IF APPLICABLE

**COMMONWEALTH OF VIRGINIA  
 PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidates)

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office, it is suggested that you file petitions in each county to facilitate the processing of the filing. If you enter the number of signatures by congressional district, enter district no. \_\_\_\_ (optional).

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN  
 side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary  
 to be held on the 8th day of November, 2016 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/his a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that she personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECURITY NUMBER (optional)
1.	SIGN <u>[Signature]</u> PRINT <u>Scott Andrews</u>	RESIDENCE <u>11 W. Leigh St</u> CITY/TOWN <u>Richmond, VA 23222</u>	<u>5/26/16</u>	
2.	SIGN <u>[Signature]</u> PRINT <u>Kwaning Letsinger</u>	RESIDENCE <u>4271 Lamplight Ct</u> CITY/TOWN <u>Richmond, VA 23234</u>	<u>5/26/16</u>	
3.	SIGN <u>[Signature]</u> PRINT <u>Julia Stephen</u>	RESIDENCE <u>31 Mulberry Ave #1</u> CITY/TOWN <u>Richmond, VA 23222</u>	<u>5/26/16</u>	
4.	SIGN <u>[Signature]</u> PRINT <u>William L. Roy Jr</u>	RESIDENCE <u>2329 Fleet Avenue</u> CITY/TOWN <u>Henrico</u>	<u>5/26/16</u>	
5.	SIGN <u>[Signature]</u> PRINT <u>Matthew Lurie</u>	RESIDENCE <u>2216 Foxwood</u> CITY/TOWN <u>Richmond VA</u>	<u>5/26/16</u>	
6.	SIGN <u>[Signature]</u> PRINT <u>Preston Brown</u>	RESIDENCE <u>307 Stockton St</u> CITY/TOWN <u>Rich VA</u>	<u>5/26/16</u>	
7.	SIGN <u>[Signature]</u> PRINT <u>Carl Kranz</u>	RESIDENCE <u>419 Gilmer St</u> CITY/TOWN <u>Richmond VA</u>	<u>5/26/16</u>	
8.	SIGN <u>[Signature]</u> PRINT <u>D M Cooper</u>	RESIDENCE <u>306 N. 2nd St</u> CITY/TOWN <u>Richmond</u>	<u>5/26/16</u>	
9.	SIGN <u>[Signature]</u> PRINT <u>Allison Andrews</u>	RESIDENCE <u>706 W. 5th St</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/26/16</u>	
10.	SIGN <u>[Signature]</u> PRINT <u>Margie Langston</u>	RESIDENCE <u>2312 Stratford Ct</u> CITY/TOWN <u>Richmond 23225</u>	<u>5/26/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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ARTICLED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)
5/17/16		RESIDENCE 4524 DEVONSHIRE RD. APT. 4 CITY/TOWN RICHMOND, VA 23225	SIGN <u>Brooke L. March</u> PRINT BROOKE L. MARCH
5/17/16		RESIDENCE 1339 N. 27th ST CITY/TOWN RVA 23223	SIGN <u>Tacey Pollock</u> PRINT TACEY POLLOCK
5/17/16		RESIDENCE 624 W 20th ST CITY/TOWN EVA 23225	SIGN <u>Elizabeth Berman</u> PRINT ELIZABETH BERMAN
5/17/16		RESIDENCE 1910 Princess Anne Ave CITY/TOWN Richmond, VA	SIGN <u>Brooke Schnerge</u> PRINT BROOKE SCHNERGE
5/17/16		RESIDENCE 2010 Princess Anne Ave CITY/TOWN Richmond VA 23223	SIGN <u>Elaine Oden</u> PRINT ELAINE ODEN
5/17/16		RESIDENCE 2914 Floyd Ave CITY/TOWN Richmond VA	SIGN <u>Carter Snipes</u> PRINT CARTER SNIPES
5/17/16		RESIDENCE 2716 Fendall Ave CITY/TOWN Richmond VA 23222	SIGN <u>Michael Murphy</u> PRINT MICHAEL MURPHY
5/17/16		RESIDENCE 2200 Carlisle Ave CITY/TOWN Richmond VA	SIGN <u>Melissa Norsham</u> PRINT MELISSA NORSHAM
5/17/16		RESIDENCE 1133N 31st Ave CITY/TOWN RVA 23223	SIGN <u>Anna Wittel</u> PRINT ANNA WITTEL
5/17/16		RESIDENCE 515 N 22nd Street CITY/TOWN Richmond VA 23223	SIGN <u>Charles Field</u> PRINT CHARLES FIELD
5/17/16		RESIDENCE 917 N 22nd APT A CITY/TOWN Richmond VA 23223	SIGN <u>Kerann Steinruck</u> PRINT KERANN STEINRUCK

Commonwealth of Virginia

- AFFIDAVIT -

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I assented the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

TV4752950

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE  
VA

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PHOTOCOPY-ONLY REPRODUCIBLE  
NOTARY SEAL STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May 20 16, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Priscilla Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia

NOTARY REGISTRATION NUMBER 2016-0000000000 DATE NOTARY QUALIFIED 05/17/2016

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Alan Schintzius  
 ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)  
3321 Garland ave  
 ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222  
 ENTER ABOVE, CITY/TOWN  
MAYOR  
 ENTER ABOVE, OFFICE SOUGHT  
 ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing of the number of signatures by congressional or state district no. (optional)

For a signed copy of the

it is suggested that you, the petitioners, should facilitate the processing of the filing of the number of signatures by congressional or state district no. (optional)

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is not a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

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 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE BEL LAST 4 DIGITS SOCIAL SECU NUMBER (OPTIONAL)
1.	SIGN <u>James Vaughn</u> PRINT <u>Jacob Vaughn</u>	RESIDENCE <u>3306 W. Franklin St.</u> CITY/TOWN <u>Richmond, VA 23221</u>	<u>5/14/16</u>	
2.	SIGN <u>Jeff Govea</u> PRINT <u>Jeff Govea</u>	RESIDENCE <u>3114 Ellwood Ave</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/14/16</u>	
3.	SIGN <u>Jenna Appere</u> PRINT <u>Jenna Appere</u>	RESIDENCE <u>3114 Ellwood Ave</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/14/16</u>	
4.	SIGN <u>Karley St. Rivers</u> PRINT <u>Karley St. Rivers</u>	RESIDENCE <u>3114 Ellwood Ave</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/14/16</u>	
5.	SIGN <u>Amanda Cleland</u> PRINT <u>Amanda Cleland</u>	RESIDENCE <u>3139 Ellwood Ave D</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/14/16</u>	
6.	SIGN <u>Mitch Rudell</u> PRINT <u>Mitch Rudell</u>	RESIDENCE <u>111 E. Clay St</u> CITY/TOWN <u>Richmond VA 23219</u>	<u>5/14/16</u>	
7.	SIGN <u>Alana C. Miles</u> PRINT <u>Alana C. Miles</u>	RESIDENCE <u>1420 Nottoway Ave</u> CITY/TOWN <u>Richmond, VA 23227</u>	<u>5/14/16</u>	
8.	SIGN <u>Phil Ford</u> PRINT <u>Phil Ford</u>	RESIDENCE <u>1420 Nottoway Ave</u> CITY/TOWN <u>Richmond, VA 23227</u>	<u>5/14/16</u>	
9.	SIGN <u>Morgan Niles</u> PRINT <u>Morgan Niles</u>	RESIDENCE <u>1100 S. Riverside</u> CITY/TOWN <u>RVA</u>	<u>5/14/16</u>	<u>YES</u>
10.	SIGN <u>Mariena Anderson</u> PRINT <u>MARIENA ANDERSON</u>	RESIDENCE <u>959 MYERS ST.</u> CITY/TOWN <u>RVA</u>	<u>5/14/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>HA WOLF</u> PRINT <u>Helen W. Conway</u>	RESIDENCE <u>2218 Pine St</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>5/14/16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>Kyle Pedersen</u>	RESIDENCE <u>1834 Gate Court</u> CITY/TOWN <u>Richmond, VA 23221</u>	<u>5/15</u>	
13	SIGN <u>[Signature]</u> PRINT <u>CHRISTIAN BRADY</u>	RESIDENCE <u>7221 BARDICK RD</u> CITY/TOWN <u>Richmond VA</u>	<u>5/15</u>	<u>9</u>
14	SIGN <u>[Signature]</u> PRINT <u>BELLA AMOS</u>	RESIDENCE <u>1902 Carter St</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15</u>	
15	SIGN <u>[Signature]</u> PRINT <u>Brian BAYNES</u>	RESIDENCE <u>505 S. Laurel St</u> CITY/TOWN <u>Richmond VA</u>	<u>3/15</u>	<u>0</u>
16	SIGN <u>[Signature]</u> PRINT <u>Micha Rig</u>	RESIDENCE <u>2609 Seminary Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>5/15</u>	
17	SIGN <u>[Signature]</u> PRINT <u>Pat Small</u>	RESIDENCE <u>3164 Carter St</u> CITY/TOWN <u>Richmond VA</u>	<u>5/16</u>	
18	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>3162 Kline</u> CITY/TOWN <u>Richmond VA</u>	<u>5/16</u>	
19	SIGN <u>[Signature]</u> PRINT <u>Sarah Barker</u>	RESIDENCE <u>5232 Weissert Av</u> CITY/TOWN <u>RVA 23225</u>	<u>5/16</u>	
20	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>357 Slacker</u> CITY/TOWN <u>Richmond VA</u>	<u>5/16</u>	
21	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>307 Slacker</u> CITY/TOWN <u>Richmond</u>	<u>5/16</u>	

Commonwealth of Virginia

**AFFIDAVIT**

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3371 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

BE PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May, 2016, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Priscilla Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

TV6175 2950

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1993

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

NOTARY PUBLIC OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

Notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate matching this petition with the official voter registration record. You are not required to provide this information and may sign the petition without providing it. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing the social security number or pertinent information.

Alan Schintzius  
 ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave  
 ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222  
 ENTER ABOVE, CITY/TOWN ENTER ABOVE, ZIP + 4  
MAYOR  
 ENTER ABOVE, OFFICE SOUGHT ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
 PETITION OF QUALIFIED  
 VOTERS

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office, it is suggested that you file petitions in each county to facilitate the processing of the filing. If you enter the number of signatures by congressional district, enter district no. [optional]

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 20 16, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/him a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITION FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECUR NUMBER (OPTIONAL)
P	1.	SIGN <u>[Signature]</u> PRINT <u>Jason Anderson</u>	RESIDENCE <u>600 N 32nd St</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15/16</u>	
P	2.	SIGN <u>[Signature]</u> PRINT <u>Tasha Cortimilia</u>	RESIDENCE <u>603 N 26th St</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15/16</u>	
C	3.	SIGN <u>[Signature]</u> PRINT <u>Bustlewicz</u>	RESIDENCE <u>1011 Terece St</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15/16</u>	
P	4.	SIGN <u>[Signature]</u> PRINT <u>Molly Campbell</u>	RESIDENCE <u>3508 Endall</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15/16</u>	
P	5.	SIGN <u>[Signature]</u> PRINT <u>Kmy Brachman</u>	RESIDENCE <u>4810 Kensington Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15/16</u>	
P	6.	SIGN <u>[Signature]</u> PRINT <u>Mary Elise Canup</u>	RESIDENCE <u>1010 W. 42nd St</u> CITY/TOWN <u>Richmond VA</u>	<u>5/15/16</u>	
P	7.	SIGN <u>[Signature]</u> PRINT <u>Rachel Griffin</u>	RESIDENCE <u>4817 Augusta Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15/16</u>	
P	8.	SIGN <u>[Signature]</u> PRINT <u>Jessica Roseberry</u>	RESIDENCE <u>4507 New Kent Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15/16</u>	
P	9.	SIGN <u>[Signature]</u> PRINT <u>Chesapeake</u>	RESIDENCE <u>1514 Seaboard Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/14/16</u>	
P	10.	SIGN <u>[Signature]</u> PRINT <u>Chelsea Wolf</u>	RESIDENCE <u>Richmond, VA</u> CITY/TOWN <u>1514 Seaboard St</u>	<u>5/16/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN JESSIE STAR KELLEY PRINT JESSIE STAR KELLEY	RESIDENCE 829 IRBY DR CITY/TOWN Richmond VA	5/14	
12	SIGN [Signature] PRINT BILLY GORMAN	RESIDENCE 1808 Rowlings CITY/TOWN Richmond, VA	5/15	2
13	SIGN [Signature] PRINT Donnie Cook	RESIDENCE 1101 Carlisle Ave CITY/TOWN Richmond VA	5/15	
14	SIGN Margaret Cook PRINT Margaret Cook	RESIDENCE 1101 Carlisle Ave CITY/TOWN Richmond VA 23221	5/15	
15	SIGN Rene Culler PRINT Dennis Cullender	RESIDENCE 1901 Cedarhurst Dr CITY/TOWN Richmond, VA 23225	5/15	
16	SIGN Carrell Pace PRINT Carrell Pace	RESIDENCE 2008 [unclear] CITY/TOWN Richmond VA	5/15	
17	SIGN [Signature] PRINT Mary [unclear]	RESIDENCE 1010 W. 42nd St CITY/TOWN RVA 23268	5/15	2
18	SIGN [Signature] PRINT Ann Charlotte Camp	RESIDENCE 1010 W. 42nd St CITY/TOWN Richmond VA 23225	5/15	
19	SIGN [Signature] PRINT Emily W. [unclear]	RESIDENCE 2113 Park Ave CITY/TOWN Richmond, VA	5/15	
20	SIGN [Signature] PRINT PAUL M IVEY	RESIDENCE 213 W 30th St CITY/TOWN Richmond 23225	5/15	
21	SIGN [Signature] PRINT Peter Albright	RESIDENCE 575 E. [unclear] St CITY/TOWN Richmond Va	5/15	

Commonwealth of Virginia - AFFIDAVIT.  
 I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

TV4752950  
 CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE  
VA  
 NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE  
1193  
 CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PHOTOGRAPHICALLY REPRODUCIBLE  
 NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION  
 State of Virginia County/City of Richmond  
 The foregoing instrument was subscribed and sworn before me this 31st day of May, 2016, by  
Alan Schintzius  
 PRINT NAME OF PERSON CIRCULATING THE PETITION

Princess Irene Clarke  
 NOTARY PUBLIC  
 Commonwealth of Virginia  
 Reg. #7037191  
 My Commission Expires 8/31/2018

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Alan Schintzius

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

[Must be filed with Declaration of Candidate]

When an election district encompasses more than one county or city, it is suggested that you use separate petition forms for qualified voters of each county or city to facilitate the processing of filing.

**FOR SIGNATURE OFFICE**

It is suggested that you file petitions in county to facilitate the processing of the filing. If you file the number of signatures by congressional district, enter district no. [optional]

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 20 16, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

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**SIGNER:** YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	SEE NOTE BEL LAST 4 DIGIT SOCIAL SEC NUMBER [OPTIONAL]
1.	SIGN PRINT	RESIDENCE CITY/TOWN		
2.	SIGN PRINT	RESIDENCE CITY/TOWN		
3.	SIGN PRINT	RESIDENCE CITY/TOWN		
4.	SIGN PRINT	RESIDENCE CITY/TOWN		
5.	SIGN <u>LINDA PATTER</u> PRINT <u>Stotts</u>	RESIDENCE <u>3234 Kensington Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/14/16</u>	
6.	SIGN <u>Catherine Gilfoyle</u> PRINT <u>Catherine Gilfoyle</u>	RESIDENCE <u>3234 Kensington Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>5-14-16</u>	
7.	SIGN <u>JAC. GORSON</u> PRINT <u>J. M. Anderson x1</u>	RESIDENCE <u>3215 KENSINGTON AVE</u> CITY/TOWN <u>Richmond, VA 23221</u>	<u>5/14/16</u>	
8.	SIGN <u>Edward Curry</u> PRINT <u>Edward Curry</u>	RESIDENCE <u>3216 Kensington Ave</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/14/16</u>	
9.	SIGN <u>Sean Biley</u> PRINT <u>Sean Biley</u>	RESIDENCE <u>3204 Kensington Ave</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/14/16</u>	
10.	SIGN <u>MARGARET B. ANDERSON</u> PRINT <u>MARGARET B. ANDERSON</u>	RESIDENCE <u>3215 KENSINGTON AVE</u> CITY/TOWN <u>Richmond, VA 23221</u>	<u>5/14/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERS

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CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>Jill White</u> PRINT <u>Jalli White</u>	RESIDENCE <u>3252 Hunters mill</u> CITY/TOWN <u>Richmond</u>	5/14/16	
12	SIGN <u>Andre P. Alcantara</u> PRINT <u>Andre P Alcantara</u>	RESIDENCE <u>2400 Canal</u> CITY/TOWN <u>Dickinson VA 23015</u>	5/14/16	
13	SIGN <u>Christy Evans</u> PRINT <u>Christy Evans</u>	RESIDENCE <u>2309 Lamb Ave</u> CITY/TOWN <u>#2 Richmond, VA</u>	5/14/16	
14	SIGN <u>Stephanie Evans</u> PRINT <u>Stephanie Evans</u>	RESIDENCE <u>2309 Lamb Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	5/14/16	
15	SIGN <u>Janine</u> PRINT <u>Janine</u>	RESIDENCE <u>2310 Lamb Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	5/14/16	
16	SIGN <u>Barbara Muhammad</u> PRINT <u>Barbara Muhammad</u>	RESIDENCE <u>2421 Lamb Ave</u> CITY/TOWN <u>Rich, VA 23222</u>	5/14/16	
17	SIGN <u>Naomi Taylor</u> PRINT <u>Naomi Taylor</u>	RESIDENCE <u>Richmond VA</u> CITY/TOWN <u>23222</u>	5/14/16	
18	SIGN <u>Shemeka Hester</u> PRINT <u>Shemeka Hester</u>	RESIDENCE <u>4304 Hillbary Ave</u> CITY/TOWN <u>Richmond VA</u>	5/14/16	
19	SIGN <u>Elizabeth Sykes</u> PRINT <u>Elizabeth Sykes</u>	RESIDENCE <u>3150 Ellwood Ave.</u> CITY/TOWN <u>Richmond, VA</u>	5/14/16	
20	SIGN <u>Lacarla Falls</u> PRINT <u>Lacarla Falls</u>	RESIDENCE <u>2502 HADEN AVE</u> CITY/TOWN <u>Richmond VA</u>	5/14/16	

Commonwealth of Virginia

**- AFFIDAVIT -**

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PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31ST day of MAY, 20 16, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia

NOTARY REGISTRATION NUMBER: 7032191 DATE NOTARY COMMISSION EXPIRES: 11/1/2018

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Alan Schintzius  
 ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave  
 ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond VA 23222  
 ENTER ABOVE, CITY/TOWN ENTER ABOVE, ZIP + 4  
MAYOR  
 ENTER ABOVE, OFFICE SOUGHT ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
 PETITION OF QUALIFIED  
 VOTERS

(Must be filed with Declaration of Candidates)

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For a statewide office, it is suggested that you file petitions in each county to facilitate the processing of the filing. Indicate the number of signatures by congressional district and district no. (optional).

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]  
☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary  
 to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is neither a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECURITY NUMBER [OPTIONAL]
P 1.	SIGN	<u>Monica Johnson</u>	RESIDENCE <u>Richmond 23221</u>	<u>5/20/16</u>	
	PRINT	<u>monica johnson</u>	CITY/TOWN <u>4305 W. Franklin</u>		
P 2.	SIGN	<u>John Smith</u>	RESIDENCE <u>1308 B. Washington Rd</u>	<u>5/20/16</u>	
	PRINT	<u>John Smith</u>	CITY/TOWN <u>Richmond VA 23225</u>		
P 3.	SIGN	<u>Ramona Hossaini</u>	RESIDENCE <u>2355 B. Road</u>	<u>5/20/16</u>	
	PRINT	<u>Ramona Hossaini</u>	CITY/TOWN <u>Richmond VA 23223</u>		
P 4.	SIGN	<u>Megan S. Summers</u>	RESIDENCE <u>1712 Oakdale Ave #2</u>	<u>5/20/16</u>	
	PRINT	<u>MEGAN S. SUMMERS</u>	CITY/TOWN <u>Richmond VA 23221</u>		
P 5.	SIGN	<u>Jack Marcus</u>	RESIDENCE <u>6122 Allen</u>	<u>5/20/16</u>	
	PRINT	<u>Jack Marcus</u>	CITY/TOWN <u>4100 Franklin St</u>		
P 6.	SIGN	<u>John G. Key</u>	RESIDENCE <u>5234 Barnside Ter</u>	<u>5/20/16</u>	
	PRINT	<u>John G. Key</u>	CITY/TOWN <u>Buena Vista VA 23061</u>		
P 7.	SIGN	<u>John Weinberg</u>	RESIDENCE <u>Richmond 23220</u>	<u>5/20/16</u>	
	PRINT	<u>John Weinberg</u>	CITY/TOWN		
P 8.	SIGN	<u>Laurel W. Winkler</u>	RESIDENCE <u>Richmond 23220</u>	<u>5/20/16</u>	
	PRINT	<u>Laurel W. Winkler</u>	CITY/TOWN <u>2007 Grove Ave</u>		
P 9.	SIGN	<u>Anne M. Wynn</u>	RESIDENCE <u>321 N. Cleveland St</u>	<u>5/20/16</u>	
	PRINT	<u>Anne M. Wynn</u>	CITY/TOWN <u>Richmond VA 23221</u>		
P 10.	SIGN	<u>Stephen Clark</u>	RESIDENCE <u>501 Stockton St</u>	<u>5/20/16</u>	
	PRINT	<u>Stephen Clark</u>	CITY/TOWN <u>Richmond VA 23224</u>		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>[Signature]</u> PRINT <u>Aaron Marcinkewich</u>	RESIDENCE <u>2308 Lancashire Dr</u> CITY/TOWN <u>Richmond VA</u>	<u>5/20/</u> <u>2016</u>	
12	SIGN <u>[Signature]</u> PRINT <u>Colleen Brennan</u>	RESIDENCE <u>1-222- Richmond</u> CITY/TOWN <u>Richmond</u>	<u>5/20/</u> <u>2016</u>	
13	SIGN <u>[Signature]</u> PRINT <u>Christie Lockery</u>	RESIDENCE <u>600 N 22nd St.</u> CITY/TOWN <u>Richmond VA 23223</u>	<u>5/20/</u> <u>2016</u>	
14	SIGN <u>[Signature]</u> PRINT <u>Jessica Sam</u>	RESIDENCE <u>Richmond</u> CITY/TOWN <u>Richmond</u>	<u>5/20/</u> <u>2016</u>	
15	SIGN <u>[Signature]</u> PRINT <u>Clay Mor-</u>	RESIDENCE <u>Richmond</u> CITY/TOWN <u>Richmond</u>	<u>5/20/</u> <u>2016</u>	
16	SIGN <u>[Signature]</u> PRINT <u>MARY ANNIE HENSLEY</u>	RESIDENCE <u>2512 E FRANKLIN ST</u> CITY/TOWN <u>Richmond VA</u>	<u>5/20/</u> <u>2016</u>	
17	SIGN <u>[Signature]</u> PRINT <u>TAYLOR JEWELL HENSLEY</u>	RESIDENCE <u>2621 STUART AVE #31</u> CITY/TOWN <u>R VA 23220</u>	<u>5/20/</u> <u>2016</u>	
18	SIGN <u>[Signature]</u> PRINT <u>Kathy Rogers</u>	RESIDENCE <u>2322 East Main Street</u> CITY/TOWN <u>Richmond VA</u>	<u>5/20/</u> <u>2016</u>	
19	SIGN <u>[Signature]</u> PRINT <u>KELLY BARROWS</u>	RESIDENCE <u>2204 E. M ARSALUS</u> CITY/TOWN <u>Richmond VA</u>	<u>5/20/</u> <u>2016</u>	
20	SIGN <u>[Signature]</u> PRINT <u>Maria Barty</u>	RESIDENCE <u>331 N. hwy 91</u> CITY/TOWN <u>Richmond VA</u>	<u>5/20/</u> <u>2016</u>	
21	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>908 Escrow Rd</u> CITY/TOWN <u>Richmond VA</u>	<u>5/20/</u> <u>2016</u>	

Commonwealth of Virginia

**- AFFIDAVIT -**

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I have used the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May, 20 16, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

PHOTOGRAPH- GALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

Priscilla Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

NOTE: IF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS, NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*

Notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate linking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without giving it. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing your social security number or identifier.

Alan Schintzius

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
VOTERS**

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you file a separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office

It is suggested that you file petitions in order to facilitate the processing of the filing. If you enter the number of signatures by congressional district, enter district no. (optional)

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the (check only one)

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is hereby a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that she personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT SHE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT SHE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BE- LAST 4 DIGIT SOCIAL SECUR NUMBER
2	1.	SIGN <u>Ward Pettit</u> PRINT <u>W</u>	RESIDENCE <u>4306 New Kent</u> CITY/TOWN <u>RVA 23225</u>	<u>5/15/16</u>	
2	2.	SIGN <u>M. Carter Guter</u> PRINT <u>M. Carter Guter</u>	RESIDENCE <u>405 E. 14th St</u> CITY/TOWN <u>RVA 23225</u>	<u>5/15/16</u>	
2	3.	SIGN <u>erin deip</u> PRINT <u>erin deip</u>	RESIDENCE <u>2720 Warden Rd</u> CITY/TOWN <u>RVA 23222</u>	<u>5/15/16</u>	
2	4.	SIGN <u>Jon deip</u> PRINT <u>Jon deip</u>	RESIDENCE <u>2720 Warden Rd</u> CITY/TOWN <u>RVA 23222</u>	<u>5/15/16</u>	
2	5.	SIGN <u>Greg Butler</u> PRINT <u>Greg Butler</u>	RESIDENCE <u>430 S Pine</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/15/16</u>	
2	6.	SIGN <u>Karen Pickinbaugh</u> PRINT <u>Karen Pickinbaugh</u>	RESIDENCE <u>2015 New Market Rd</u> CITY/TOWN <u>Richmond, VA 23231</u>	<u>5/15/16</u>	
2	7.	SIGN <u>Kim MAMND</u> PRINT <u>Kim MAMND</u>	RESIDENCE <u>2113 N. 10th St</u> CITY/TOWN <u>Richmond VA 23225</u>	<u>5/15/16</u>	
2	8.	SIGN <u>Paul Webb</u> PRINT <u>Paul Webb</u>	RESIDENCE <u>3130 Elmwood Ave</u> CITY/TOWN <u>RVA 23221</u>	<u>5/16/16</u>	
2	9.	SIGN <u>Paul Webb</u> PRINT <u>Paul Webb</u>	RESIDENCE <u>2015 New Market Rd</u> CITY/TOWN <u>Richmond</u>	<u>5/16/16</u>	
2	10.	SIGN <u>R. C. Byrnes</u> PRINT <u>R. C. Byrnes</u>	RESIDENCE <u>811 S. 10th St</u> CITY/TOWN <u>Richmond</u>	<u>5/16/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number when checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

SEE REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)
5/15		7013 South Dr Richmond VA	SIGN: <u>[Signature]</u> PRINT: <u>Sarah Makfor</u>
5/15		7203 Brighman Rd Richmond VA 23226	SIGN: <u>[Signature]</u> PRINT: <u>Clair Morgan</u>
5/15		7203 Brighman Rd Richmond VA 23226	SIGN: <u>[Signature]</u> PRINT: <u>CRISTIN MORGAN</u>
5/15		3203 Rueger St RVA	SIGN: <u>[Signature]</u> PRINT: <u>Ashley Nick</u>
5/15		2113 N. 1st St RVA	SIGN: <u>[Signature]</u> PRINT: <u>NINA MARINO</u>
5/15		2114 E. Leigh St. RVA	SIGN: <u>[Signature]</u> PRINT: <u>Tyler G. Carter</u>
5/15		3512 Stuart Ave #1 Richmond VA	SIGN: <u>[Signature]</u> PRINT: <u>Kimberly Dangelo</u>
			SIGN: <u>[Signature]</u> PRINT: <u>JERRY</u>
5/15/16		4415 Fildshaw Ln Richmond VA	SIGN: <u>[Signature]</u> PRINT: <u>Arion Goodwin</u>
5/15/16		4418 OUTSLAW AVE RICHMOND VA	SIGN: <u>[Signature]</u> PRINT: <u>KEATHLE COHEN</u>
5/15		6717 Sepulch Rd Richmond VA	SIGN: <u>[Signature]</u> PRINT: <u>Craig Burns</u>

Commonwealth of Virginia

**AFFIDAVIT**

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SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May, 20 16, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE  
VA

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

Princeton Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

NAME OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

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**Alan Schintzius**

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidates)

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We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the (check only one)

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

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SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

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C	1. SIGN <u>[Signature]</u> PRINT <u>Danielle Reagie</u>	RESIDENCE <u>2910 Hawthorne Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>5/15/16</u>	
R	2. SIGN <u>[Signature]</u> PRINT <u>J. Barry Corcoran</u>	RESIDENCE <u>3310 Hanover Ave. Apt 2</u> CITY/TOWN <u>Richmond VA</u>	<u>5/15/16</u>	
R	3. SIGN <u>[Signature]</u> PRINT <u>Terrell Walker</u>	RESIDENCE <u>2515 Kensington Ave</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>5/15</u>	
R	4. SIGN <u>[Signature]</u> PRINT <u>Nick W. Boone</u>	RESIDENCE <u>116 Kensington Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>5/15/16</u>	
R	5. SIGN <u>[Signature]</u> PRINT <u>Kelly Loneragan</u>	RESIDENCE <u>3320 W. Grace St. B</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/15/16</u>	
R	6. SIGN <u>[Signature]</u> PRINT <u>Evan Mackenzie</u>	RESIDENCE <u>2322 Parkwood Ave</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>5/15/16</u>	
R	7. SIGN <u>[Signature]</u> PRINT <u>Christina Thompson</u>	RESIDENCE <u>2322 Parkwood Ave</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>5/15/16</u>	
R	8. SIGN <u>[Signature]</u> PRINT <u>Ken Roper</u>	RESIDENCE <u>1900 Carter St.</u> CITY/TOWN <u>Richmond 23220</u>	<u>5/15</u>	
R	9. SIGN <u>[Signature]</u> PRINT <u>Katie McBride</u>	RESIDENCE <u>1900 Carter St.</u> CITY/TOWN <u>Richmond 23220</u>	<u>5/15/16</u>	
R	10. SIGN <u>[Signature]</u> PRINT <u>Ken Roper</u>	RESIDENCE <u>1234 2nd St. Apt 20</u> CITY/TOWN <u>Richmond VA</u>	<u>5/15/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUE FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
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OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>Brigid Burns</u> PRINT <u>Brigid Burns</u>	RESIDENCE <u>6717 S. Joyce Ave</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>5/16/16</u>	
12	SIGN <u>Marvin Kugel</u> PRINT <u>Marvin Kugel</u>	RESIDENCE <u>5111 Boscobel Ave</u> CITY/TOWN <u>Richmond</u>	<u>5/16/16</u>	
13	SIGN <u>Sophia Conness</u> PRINT <u>Sophia Conness</u>	RESIDENCE <u>1913 Lakeview Avenue L</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>5/16/16</u>	
14	SIGN <u>Grant Matthews</u> PRINT <u>Grant Matthews</u>	RESIDENCE <u>1657 Limerick DR</u> CITY/TOWN <u>Richmond VA 23224</u>	<u>16-05-16</u>	
15	SIGN <u>Tommy Birchett</u> PRINT <u>Tommy Birchett</u>	RESIDENCE <u>410 S Laurel St</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>5/16/16</u>	
16	SIGN <u>Teresa Birchett</u> PRINT <u>Teresa Birchett</u>	RESIDENCE <u>410 S. Laurel St</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>5/16/16</u>	
17	SIGN <u>Todd Hershey</u> PRINT <u>Todd Hershey</u>	RESIDENCE <u>1112 N. SHEPPARD</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/16/16</u>	
18	SIGN <u>Tara Leightner</u> PRINT <u>Tara Leightner</u>	RESIDENCE <u>Richmond, Va</u> CITY/TOWN <u></u>	<u>5/16/16</u>	
19	SIGN <u>Will</u> PRINT <u>Will</u>	RESIDENCE <u>1829 FRANK ST</u> CITY/TOWN <u>Richmond VA</u>	<u>5/16/16</u>	
20	SIGN <u>Will</u> PRINT <u>Will</u>	RESIDENCE <u>2115 PARK AVE, 112</u> CITY/TOWN <u>Richmond</u>	<u>5/16/16</u>	
21	SIGN <u>Rubin Stagnaro</u> PRINT <u>Rubin Stagnaro</u>	RESIDENCE <u>1875 Texas Ave</u> CITY/TOWN <u>Richmond</u>	<u>5/16/16</u>	

Commonwealth of Virginia

**AFFIDAVIT**

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764752950

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1993

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

PHOTOCOPIABLELY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this  
31st day of May 20 16, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Princess Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191

My Commission Expires 8/31/2018

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**Alan Schintzius**  
 ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)  
**3321 Garland Ave**  
 ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
**Richmond Va 23222**  
 ENTER ABOVE, CITY/TOWN  
**MAYOR**  
 ENTER ABOVE, OFFICE SOUGHT  
 ENTER ABOVE, DISTRICT, IF APPLICABLE

**PETITION OF QUALIFIED VOTERS**

(Must be filed with Declaration of Candidate)

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For a statewide office, it is suggested that you file petitions in each county to facilitate the processing of the filing. If you enter the number of signatures by congressional district, enter district no. (optional).

We, the qualified voters of the district in which the above candidate seeks nomination or election and of **Richmond** signed hereunder on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary to be held on the **8th** day of **November** 20**16**, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is both a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that she personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT SHE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT SHE PERSONALLY WITNESSED EACH SIGNATURE  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITION FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE RE LAST 4 DIGIT SOCIAL SECURITY NUMBER OPTIONAL
P	1.	SIGN <b>Adrian Meyer</b> PRINT <b>Adrian Meyer</b>	RESIDENCE <b>1411 Carter St</b> CITY/TOWN <b>Richmond VA</b>	<b>5/15/16</b>	
Y	2.	SIGN <b>Chris Crane</b> PRINT <b>Chris Crane</b>	RESIDENCE <b>4103 Hillcrest Rd</b> CITY/TOWN <b>Richmond VA</b>	<b>5/15/16</b>	
Y	3.	SIGN <b>John Crane</b> PRINT <b>John Crane</b>	RESIDENCE <b>4103 Hillcrest Rd</b> CITY/TOWN <b>Richmond VA</b>	<b>5/15/16</b>	
P	4.	SIGN <b>Jada Jackson</b> PRINT <b>Jada Jackson</b>	RESIDENCE <b>1411 Carter St</b> CITY/TOWN <b>Richmond VA</b>	<b>5/15/16</b>	
C	5.	SIGN <b>John Hott</b> PRINT <b>John Hott</b>	RESIDENCE <b>8100 Montrose Ave</b> CITY/TOWN <b>Richmond VA 23115</b>	<b>5/15/16</b>	
P	6.	SIGN <b>Chris Gore</b> PRINT <b>Chris Gore</b>	RESIDENCE <b>2818 Dupont Circle</b> CITY/TOWN <b>Richmond VA 23222</b>	<b>5/15/16</b>	
P	7.	SIGN <b>Alanda Perry Jones</b> PRINT <b>Alanda Perry Jones</b>	RESIDENCE <b>3408 Garland Ave</b> CITY/TOWN <b>Richmond VA 23222</b>	<b>5/15/16</b>	
P	8.	SIGN <b>Matthew Jones</b> PRINT <b>Matthew Jones</b>	RESIDENCE <b>3408 Garland Ave</b> CITY/TOWN <b>Richmond VA 23222</b>	<b>5/15/16</b>	
P	9.	SIGN <b>Juliana Szigarto</b> PRINT <b>Juliana Szigarto</b>	RESIDENCE <b>2911 Montrose Ave</b> CITY/TOWN <b>Richmond VA 23222</b>	<b>5/16/16</b>	
V	10.	SIGN <b>Jennifer H. Mund...</b> PRINT <b>Jennifer H. Mund...</b>	RESIDENCE <b>2914 Montrose Ave</b> CITY/TOWN <b>Richmond VA 23222</b>	<b>5/16/16</b>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVER

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

NOTED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]
5-16-26		RESIDENCE 2915 Montrose Ave	SIGN <u>Ronnie M. Johnson</u> PRINT <u>Ronnie M. Johnson</u>
5-16		RESIDENCE 2916 Montrose Ave	SIGN <u>George M. Murdin</u> PRINT <u>George M. Murdin</u>
5-16		RESIDENCE 4113 Kensington	SIGN <u>Arnold Rosenbaum</u> PRINT <u>ARNOLD ROSENBAUM</u>
5/16		RESIDENCE 249 37c st	SIGN <u>George Harris</u> PRINT <u>George Harris</u>
5/16		RESIDENCE 2308 L.A. b Ave	SIGN <u>Goycel L. Anderson</u> PRINT <u>Goycel L. Anderson</u>
5-16		RESIDENCE 2310 Hamb Ave	SIGN <u>Wendy Price</u> PRINT <u>Wendy Price</u>
5/16		RESIDENCE 601 N 22nd St	SIGN <u>Mary N. Field</u> PRINT <u>MARY N. FIELD</u>
5/11		RESIDENCE 601 N 22nd St	SIGN <u>Charles A. Field</u> PRINT <u>CHARLES A. FIELD</u>
5-16		RESIDENCE 515 N 22nd St	SIGN <u>Steve Mc</u> PRINT <u>Steve Mc</u>
5-16		RESIDENCE 1002 N 26th St	SIGN <u>Kelly Doolin</u> PRINT <u>Kelly Doolin</u>
5-16-16		RESIDENCE 724 Bunting Rd	SIGN <u>Erica Jell</u> PRINT <u>Erica Jell</u>

Commonwealth of Virginia

**- AFFIDAVIT -**

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I understand that falsely signing this affidavit is a punishable offense by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

164752950

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE  
VA

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May, 20 16, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Princeton Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

NOTARY NOTICE: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate linking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without providing it. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

Not included in seal/stamp

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office it is suggested that you file petitions in counties to facilitate the processing of the filing. If you list the number of signatures by congressional district enter district no. \_\_\_\_\_ (optional)

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)

Alan S. Taylor

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland Ave

ENTER ABOVE, CITY/TOWN

Richmond Va 23220

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

IMMUNOC

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of \_\_\_\_\_ signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☐ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
2.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
3.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
4.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
5.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
6.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
7.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
8.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
9.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		
10.	SIGN: [Signature] PRINT: [Name]	RESIDENCE: [Address] CITY/TOWN: [City]		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing a social security number or part thereof.

CONTINUED FROM REVERSE SIDE CANDIDATE NAME:

OFFICE SOUGHT:

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
11	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
12	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
13	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
14	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
15	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
16	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
17	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
18	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
19	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
20	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
21	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		

Commonwealth of Virginia

## - AFFIDAVIT -

T64277289

Phoncia H. Davis swear or affirm that (i) my full residential address is 1320 W. Clay St. in the State/Commonwealth of Virginia; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
Virginia

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE

3172

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this  
10 day of March, 2012, by

PRINT NAME OF PERSON CIRCULATING THE PETITION

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER DATE NOTARY COMMISSION EXPIRES\*\*

Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

If not included in seal/stamp.

SBE-506/521 REV 1.2013

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidates)

When an election district includes more than one county or city, it is suggested that you complete a separate petition form for qualified voters in each county or city to facilitate the processing of the petition.

For a state-wide office

It is suggested that you file petitions in each county or city to facilitate the processing of the petition. The number of signatures by Congress and the number of signatures by Congress are entered on the back of the petition.

Alan Schintzius 31A

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further certify that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be produced. The circulator must be a person who is a legal resident of the United States of America and who is not a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that she personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT SHE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT SHE PERSONALLY WITNESSED EACH SIGNATURE

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE B LAST 4 DIGIT SOCIAL SEC NUMBER (OPTIONAL)
R 1.	SIGN <u>Arthur P. Pinner</u> PRINT <u>Arthur Pinner</u>	RESIDENCE <u>3321 Garland Ave</u> CITY/TOWN <u>Rich Va</u>	<u>6/11/16</u>	
R 2.	SIGN <u>Leneisha Goode</u> PRINT <u>Leneisha Goode</u>	RESIDENCE <u>1800 Dinwiddie Ave</u> CITY/TOWN <u>Richmond Va 23224</u>	<u>6-11-16</u>	
R 3.	SIGN <u>Thomas W. Miller</u> PRINT <u>Thomas W. Miller</u>	RESIDENCE <u>908 E 16th</u> CITY/TOWN <u>Richmond</u>	<u>6-11-16</u>	
R 4.	SIGN <u>Lach Harden</u> PRINT <u>Lach Harden</u>	RESIDENCE <u>2007 Dinwiddie Ave</u> CITY/TOWN <u>Richmond, VA 23224</u>	<u>6-11-16</u>	
R 5.	SIGN <u>Sharon Smith</u> PRINT <u>Sharon Smith</u>	RESIDENCE <u>2016 Dinwiddie Ave</u> CITY/TOWN <u>Richmond, Va</u>	<u>6-11-16</u>	
R 6.	SIGN <u>Phillip D. Alderman</u> PRINT <u>Phillip D. Alderman</u>	RESIDENCE <u>2016 Dinwiddie Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>6/11/2016</u>	
R 7.	SIGN <u>Kerry Smith</u> PRINT <u>Kerry Smith</u>	RESIDENCE <u>3309 Dinwiddie St</u> CITY/TOWN <u>Richmond, VA</u>	<u>6/11/2016</u>	
R 8.	SIGN <u>Erin Bright</u> PRINT <u>Erin Bright</u>	RESIDENCE <u>2304 Hillview Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>6/11/2016</u>	
9.	SIGN PRINT	RESIDENCE CITY/TOWN		
10.	SIGN PRINT	RESIDENCE CITY/TOWN		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to be checked this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

USED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR 398

LATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
IGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
SIGN	RESIDENCE		
PRINT	CITY/TOWN		
SIGN	RESIDENCE		
PRINT	CITY/TOWN		
SIGN	RESIDENCE		
PRINT	CITY/TOWN		
SIGN	RESIDENCE		
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SIGN	RESIDENCE		
PRINT	CITY/TOWN		
SIGN	RESIDENCE		
PRINT	CITY/TOWN		
SIGN	RESIDENCE		
PRINT	CITY/TOWN		

Commonwealth of Virginia

- AFFIDAVIT -

Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia; (ii) I am a legal resident of Richmond in the County/City/Town of Richmond; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I understand that falsely signing this affidavit is a punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of June, 2018, by Alan Schintzius

PRINT NAME OF PERSON CIRCULATING THE PETITION

TL61752950

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

any notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate copying this petition with the official voter registration record. You are not required to provide this information and may sign the petition without it so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

Not included in seal/stamp.

SBE-506/521 REV 1.2013

**COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS**

(Must be filed with Declaration of Candidacy)

After an election district is proposed, the county or city is suggested that it file a separate petition form for qualified voters in the county or city to facilitate the processing of the petition.

For statewide office, it is suggested that you file petitions in each county or city to facilitate the processing of the petition. You must enter the number of signatures of congressional or state legislative candidates in the column designated for that candidate.

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)  
Alan Schintzius

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
3321 Garland Ave  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is hereby a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS SOCIAL SEC NUMBER (OPTIONAL)
1.	SIGN <u>Rechele Lee</u> PRINT <u>Rechele Lee</u>	RESIDENCE <u>2317 Halifax Ave.</u> CITY/TOWN <u>Richmond VA 23224</u>	<u>6/11/16</u>	
2.	SIGN <u>Selwyn Thompson</u> PRINT <u>Selwyn Thompson</u>	RESIDENCE <u>2323 Halifax</u> CITY/TOWN <u>Richmond Va</u>	<u>6/11/16</u>	
3.	SIGN <u>Charles Evans Hughes Sr</u> PRINT <u>CHARLES EVANS HUGHES SR</u>	RESIDENCE <u>6844 EVERGLADES DR</u> CITY/TOWN <u>RICHMOND, VA 23225</u>	<u>6/11/16</u>	
4.	SIGN <u>Bill</u> PRINT <u>Bill</u>	RESIDENCE <u>6666 666</u> CITY/TOWN <u>666 666</u>	<u>6/11/16</u>	
5.	SIGN <u>Shiquita S. Lonn</u> PRINT <u>Shiquita S. Lonn</u>	RESIDENCE <u>2207 Cordiant Ave</u> CITY/TOWN <u>Richmond Va</u>	<u>6/11/16</u>	
6.	SIGN <u>Feresa Williams</u> PRINT <u>Feresa Williams</u>	RESIDENCE <u>2207 Riverbent</u> CITY/TOWN <u>Richmond VA 23224</u>	<u>6/11/16</u>	
7.	SIGN <u>Joan Loving</u> PRINT <u>Joan Loving</u>	RESIDENCE <u>2207 Garden Ave</u> CITY/TOWN <u>Rich Va</u>	<u>6/11/16</u>	
8.	SIGN <u>Glenn Jones</u> PRINT <u>Glenn Jones</u>	RESIDENCE <u>1605 Edicards Ave</u> CITY/TOWN <u>RICHMOND VA</u>	<u>6/11/16</u>	
9.	SIGN <u>Bence Harris</u> PRINT <u>Bence Harris</u>	RESIDENCE <u>3621 Benton Ave</u> CITY/TOWN <u>Rich Va 23222</u>	<u>6/11/16</u>	
10.	SIGN <u>Betty Bridges</u> PRINT <u>Betty Bridges</u>	RESIDENCE <u>2001 Hg/L Fg 16-11</u> CITY/TOWN <u>Richmond Va</u>		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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MAILED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR 408

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
SIGN: <u>Arthur Bridges</u> PRINT: <u>Arthur Bridges</u>	RESIDENCE: <u>1108 Edmonson Ave</u> CITY/TOWN: <u>Rich, Va 23224</u>	<u>6/4/16</u>	
SIGN: <u>Kermit Green</u> PRINT: <u>Kermit Green</u>	RESIDENCE: <u>Rich, VA Ingram Ave</u> CITY/TOWN: <u>Richmond VA</u>	<u>6/4/16</u>	
SIGN: <u>Brenda Hacker</u> PRINT: <u>Brenda Hacker</u>	RESIDENCE: <u>2113 Ingram Ave</u> CITY/TOWN: <u>Richmond, VA</u>	<u>6/4/16</u>	
SIGN: <u>Jillany Tamm</u> PRINT: <u>Jillany Tamm</u>	RESIDENCE: <u>1500 Drewry St</u> CITY/TOWN: <u>Richmond Va</u>	<u>6/11/16</u>	
SIGN: <u>Heather Shellen</u> PRINT: <u>Heather Shellen</u>	RESIDENCE: <u>2415 Ingram Ave</u> CITY/TOWN: <u>Richmond VA</u>	<u>6/11/16</u>	
SIGN: <u>James Shellen</u> PRINT: <u>James Shellen</u>	RESIDENCE: <u>2415 Ingram</u> CITY/TOWN: <u>Richmond VA</u>	<u>6/11/16</u>	
SIGN: <u>Alana Apples</u> PRINT: <u>Alana Apples</u>	RESIDENCE: <u>1808 Janita Ave</u> CITY/TOWN: <u>Richmond Va</u>	<u>6/14/16</u>	
SIGN: <u>Elliot Hume</u> PRINT: <u>Elliot Hume</u>	RESIDENCE: <u>4104 Leamon</u> CITY/TOWN: <u>Richmond VA</u>	<u>6/11/16</u>	
SIGN: <u>Christine Harris</u> PRINT: <u>Christine Harris</u>	RESIDENCE: <u>1800 Halifax Ave</u> CITY/TOWN: <u>Richmond VA</u>	<u>6/6/16</u>	
SIGN: <u>Robert F. Battist</u> PRINT: <u>Robert F. Battist</u>	RESIDENCE: <u>1717 Fairfax Ave</u> CITY/TOWN: <u>Richmond VA</u>	<u>6/11/16</u>	
SIGN: <u>Mark Hume</u> PRINT: <u>Mark Hume</u>	RESIDENCE: <u>1700 Dundick Ave.</u> CITY/TOWN: <u>Richmond, Va. 23224</u>	<u>6/11/16</u>	

Commonwealth of Virginia

**AFFIDAVIT.**

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia, in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

NOT PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of June, 2016, by Alan Schintzius

PRINT NAME OF PERSON CIRCULATING THE PETITION

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

T64752950

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

NOTARY PUBLIC OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

Notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate linking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing your social security number or part thereof.

not included in seal/stamp.

Alan Schintzius L11A

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR ENTER ABOVE ZIP + 4

ENTER ABOVE, OFFICE SOUGHT  
 ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidate)

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For statewide office

It is suggested that you file petitions in person to facilitate the processing of the filing. If you enter the number of signatures by congressional district, enter district no. \_\_\_\_\_ (optional).

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN  
 side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary  
 to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of this petition. Numerous pages may be circulated. The circulator of each page must be a person who is hereby a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECURITY NUMBER (OPTIONAL)
R 1.	SIGN <u>Alan Schintzius</u> PRINT <u>Alan Schintzius</u>	RESIDENCE <u>2303 1st Ave</u> CITY/TOWN <u>Richmond</u>	<u>6-10-16</u>	
R 2.	SIGN <u>Felicia D. Cosby</u> PRINT <u>Felicia D. Cosby</u>	RESIDENCE <u>3530 Cardwell Ave</u> CITY/TOWN <u>Richmond</u>	<u>6/10/16</u>	
R 3.	SIGN <u>Evelyn Henderson</u> PRINT <u>Evelyn Henderson</u>	RESIDENCE <u>1124 Dove St</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>6/10/16</u>	
R 4.	SIGN <u>Keith Cole</u> PRINT <u>Keith Cole</u>	RESIDENCE <u>210 S 3rd Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>6-10-16</u>	
R 5.	SIGN <u>Beron Williams</u> PRINT <u>Beron Williams</u>	RESIDENCE <u>114 N Ivy Ave</u> CITY/TOWN <u>Highland Springs 23175</u>	<u>6-10-16</u>	
R 6.	SIGN <u>Samad Khattar</u> PRINT <u>Samad Khattar</u>	RESIDENCE <u>2900 2nd Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>6-10-16</u>	
R 7.	SIGN <u>Mary Pritchard</u> PRINT <u>Mary Pritchard</u>	RESIDENCE <u>2002 Juniper St</u> CITY/TOWN <u>Rich Va</u>	<u>6/10/16</u>	
R 8.	SIGN <u>Danyina Boyd</u> PRINT <u>Danyina Boyd</u>	RESIDENCE <u>1910 1st Ave</u> CITY/TOWN <u>Richmond Va 23222</u>	<u>6/10/16</u>	
R 9.	SIGN <u>Rosevelt McCall</u> PRINT <u>Rosevelt McCall</u>	RESIDENCE <u>2114 2nd Ave</u> CITY/TOWN <u>Richmond Va</u>	<u>6/10/16</u>	
R 10.	SIGN <u>Austen Mikelaites</u> PRINT <u>Austen Mikelaites</u>	RESIDENCE <u>2001 E Grace</u> CITY/TOWN <u>Richmond VA</u>	<u>6/10/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR 413

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>[Signature]</u> PRINT <u>Michael Macbrey</u>	RESIDENCE <u>3533 Hemmer St</u> CITY/TOWN <u>Richmond VA 23221</u>	6-16-16	
12	SIGN <u>[Signature]</u> PRINT <u>Curtis Carter</u>	RESIDENCE <u>26013 Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	6/16/16	
13	SIGN <u>TARA THOMAS</u> PRINT <u>THOMAS TARA</u>	RESIDENCE <u>2607 3rd Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	6/10/16	
14	SIGN <u>[Signature]</u> PRINT <u>Gabriel Thomas</u>	RESIDENCE <u>[Signature]</u> CITY/TOWN <u>[Signature]</u>		
15	SIGN <u>[Signature]</u> PRINT <u>Gabriel Thomas</u>	RESIDENCE <u>2608 3rd Ave</u> CITY/TOWN <u>Rich VA 23222</u>	6-16-16	
16	SIGN <u>[Signature]</u> PRINT <u>Eric Jones</u>	RESIDENCE <u>2608 3rd Ave</u> CITY/TOWN <u>Rich VA 23222</u>	6/10/2016	
17	SIGN <u>[Signature]</u> PRINT <u>Pete Fortenberry</u>	RESIDENCE <u>2319 3rd Ave</u> CITY/TOWN <u>Rich VA 23222</u>	6-10-2016	
18	SIGN <u>[Signature]</u> PRINT <u>Doris W Jackson</u>	RESIDENCE <u>2715 3rd Ave</u> CITY/TOWN <u>Rich VA 23222</u>	6/10/16	
19	SIGN <u>[Signature]</u> PRINT <u>Soli Kafi</u>	RESIDENCE <u>2715 3rd Ave</u> CITY/TOWN <u>Rich VA 23222</u>	6/10/16	
20	SIGN <u>[Signature]</u> PRINT <u>Alexa Prescod</u>	RESIDENCE <u>26013 Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	6/10/16	
21	SIGN <u>[Signature]</u> PRINT <u>Alexander Prescod</u>	RESIDENCE <u>2606 1st Avenue</u> CITY/TOWN <u>Richmond, Va</u>	6-10-16	

Commonwealth of Virginia - AFFIDAVIT -

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I have personally witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

SIGNATURE OF PERSON CIRCULATING THE PETITION: [Signature]

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of June, 2016, by Alan Schintzius

PRINT NAME OF PERSON CIRCULATING THE PETITION: Alan Schintzius

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

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Alan Schintzius 412A

---

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

---

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

---

ENTER ABOVE, CITY/TOWN ENTER ABOVE, ZIP + 4  
MAYOR

---

ENTER ABOVE, OFFICE SOUGHT ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidate)

When an election district includes more than one county or city it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of filing

For a statewide office

It is suggested that you file petitions in each county to facilitate the processing of the filing. If you enter the number of signatures by congressional district enter district no. \_\_\_\_\_ (optional)

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

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CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE BEL LAST 4 DIGITS SOCIAL SECU NUMBER (OPTIONAL)
R 1.	SIGN	<u>Erik Larson</u>	RESIDENCE <u>26186 Lincoln Ave</u>	<u>6-10-16</u>	
	PRINT	<u>Erik Larson</u>	CITY/TOWN <u>Richmond Va 23222</u>		
R 2.	SIGN	<u>Nicholas Kieczewski</u>	RESIDENCE <u>112 E. Mainwood Rd</u>	<u>6/10/16</u>	
	PRINT	<u>Nicholas Kieczewski</u>	CITY/TOWN <u>Richmond VA 23224</u>		
R 3.	SIGN	<u>Marcus Smith</u>	RESIDENCE <u>2703 Barton Ave</u>	<u>6-10-16</u>	
	PRINT	<u>Marcus Smith</u>	CITY/TOWN <u>Richmond</u>		
R 4.	SIGN	<u>Michelle Wilkins</u>	RESIDENCE <u>2713 Fendall</u>	<u>6-10-16</u>	
	PRINT	<u>Michelle Wilkins</u>	CITY/TOWN <u>Rich VA 23257</u>		
R 5.	SIGN	<u>Jason Yndestad</u>	RESIDENCE <u>2305 Barton Ave</u>	<u>6-10-16</u>	
	PRINT	<u>Jason Yndestad</u>	CITY/TOWN <u>Richmond, VA 23222</u>		
R 6.	SIGN	<u>Charles Watson</u>	RESIDENCE <u>2411 2nd St</u>	<u>6/10/16</u>	
	PRINT	<u>Charles Watson</u>	CITY/TOWN <u>Richmond Va</u>		
R 7.	SIGN	<u>Andrew Straguel</u>	RESIDENCE <u>1002 Craftworks</u>	<u>6-10-16</u>	
	PRINT	<u>Andrew Straguel</u>	CITY/TOWN <u>Rich VA 23222</u>		
R 8.	SIGN	<u>Eddie Jackson Jr</u>	RESIDENCE <u>3201 Dill Ave</u>	<u>6-10-16</u>	
	PRINT	<u>Eddie Jackson Jr</u>	CITY/TOWN <u>Richmond</u>		
R 9.	SIGN	<u>Eddie Jackson Sr</u>	RESIDENCE <u>3321 Dill Ave</u>	<u>6-10-16</u>	
	PRINT	<u>Lenner Williams</u>	CITY/TOWN <u>Richmond, Va</u>		
R 10.	SIGN	<u>[Signature]</u>	RESIDENCE <u>[Address]</u>		
	PRINT		CITY/TOWN		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR 42B

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>Angela Lee</u> PRINT <u>Angela Lee</u>	RESIDENCE <u>3114 Richmond Henric</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>6/10/16</u>	
12	SIGN <u>Gregory Harper</u> PRINT <u>Gregory Harper</u>	RESIDENCE <u>2406 S 7th Ave</u> CITY/TOWN <u>Richmond, VA 23222</u>	<u>6/16/16</u>	
13	SIGN <u>Gregory Harper</u> PRINT <u>Gregory Harper</u>	RESIDENCE <u>2517 3rd Ave</u> CITY/TOWN <u>Richmond, Va</u>	<u>6/10/16</u>	
14	SIGN <u>John Kilby</u> PRINT <u>John Kilby</u>	RESIDENCE <u>3609 4th Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>6/10/16</u>	
15	SIGN <u>Jessica J. J.</u> PRINT <u>Jessica J. J.</u>	RESIDENCE <u>3501 King Henry</u> CITY/TOWN <u>Richmond VA</u>	<u>6/10/16</u>	
16	SIGN <u>Oranella S. Holmes</u> PRINT <u>Oranella S. Holmes</u>	RESIDENCE <u>4525 Cranford Ave</u> CITY/TOWN <u>Richmond</u>	<u>6/10/16</u>	
17	SIGN <u>John Kilby</u> PRINT <u>John Kilby</u>	RESIDENCE <u>512 Patrick Ave</u> CITY/TOWN <u>Richmond</u>	<u>6/10/16</u>	
18	SIGN <u>Rita Robinson</u> PRINT <u>Rita Robinson</u>	RESIDENCE <u>3304 Garland Ave</u> CITY/TOWN <u>Rich. VA 23222</u>	<u>6/10/2016</u>	
19	SIGN <u>Gerard R. Richards</u> PRINT <u>Gerard R. Richards</u>	RESIDENCE <u>2208 1st Ave</u> CITY/TOWN <u>Rich. VA 23222</u>	<u>6-10-10</u>	
20	SIGN <u>Dean Scaturro</u> PRINT <u>Dean Scaturro</u>	RESIDENCE <u>1203 Willow St</u> CITY/TOWN <u>R. VA 23222</u>	<u>6-10-10</u>	
21	SIGN <u>Dean Scaturro</u> PRINT <u>Dean Scaturro</u>	RESIDENCE <u>2203 1st</u> CITY/TOWN <u>Rich. VA 23222</u>	<u>6/10/16</u>	

Commonwealth of Virginia

**AFFIDAVIT.**

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I assented the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of June, 2016, by Alan Schintzius

PRINT NAME OF PERSON CIRCULATING THE PETITION

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

TR64252950

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

NOTARY PUBLIC OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

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413A

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)  
Alan Schintzius  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, OFFICE SOUGHT  
 ENTER ABOVE, DISTRICT IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Intent)

When an election district divides more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the petition.

**FOR SIGNATURE OF**

It is suggested that you file the petition in duplicate to facilitate the processing of the filing. Indicate the number of signatures by congressional district or election district on the (optional) form.

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder on or the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the (check only one)

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 20 16, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

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**CIRCULATOR:** MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
**SIGNER:** YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BE LAST 4 DIGIT SOCIAL SEC. NUMBER (OPTIONAL)
R 1.	SIGN	<u>MATT A CONRAD</u>	RESIDENCE <u>2002 Princess Anne</u> CITY/TOWN <u>RVA</u>	<u>6/10/16</u>	
C 2.	SIGN	<u>Alicia Conrad</u>	RESIDENCE <u>2002 Princess Anne</u> CITY/TOWN <u>RVA</u>	<u>6/10/16</u>	
R 3.	SIGN	<u>Charles J. F.</u>	RESIDENCE <u>1912 Princess Anne</u> CITY/TOWN <u>Richmond VA</u>	<u>6/10/16</u>	
R 4.	SIGN	<u>John Harker</u>	RESIDENCE <u>3500 E. BROAD</u> CITY/TOWN <u>Rich VA 23223</u>	<u>6/10/16</u>	
R 5.	SIGN	<u>Steve Rogers</u>	RESIDENCE <u>2906 E. Broad St</u> CITY/TOWN <u>Richmond, VA</u>	<u>6/10/16</u>	
R 6.	SIGN	<u>Mike Trachsel</u>	RESIDENCE <u>2600 E. Grace St.</u> CITY/TOWN <u>Richmond VA 23223</u>	<u>6/10</u>	
R 7.	SIGN	<u>Steve Lewis</u>	RESIDENCE <u>2600 E. Grace St.</u> CITY/TOWN <u>Richmond VA 23223</u>	<u>6/10</u>	
R 8.	SIGN	<u>Robert Pogonkless</u>	RESIDENCE <u>2600 E. Grace St.</u> CITY/TOWN <u>Richmond, VA 23223</u>	<u>6/10</u>	
R 9.	SIGN	<u>Mike Decker</u>	RESIDENCE <u>2708 E. Broad St</u> CITY/TOWN <u>Richmond, VA</u>	<u>6/10</u>	
R 10.	SIGN	<u>Aimee Decker</u>	RESIDENCE <u>2708 E. Broad St</u> CITY/TOWN <u>Richmond, VA</u>	<u>6/10</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to be checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

ISSUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR 41315 3

DECLARANT: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
SIGN <u>Sam Tuttle</u>	RESIDENCE <u>615 N 20th St</u>	<u>6-10-16</u>	<u>7</u>
PRINT <u>Sam Tuttle</u>	CITY/TOWN <u>Richmond, VA</u>		
SIGN <u>Orlando Palmer</u>	RESIDENCE <u>4324 Beulahucksck</u>	<u>10/14/91</u>	<u>3333</u>
PRINT <u>Orlando Palmer</u>	CITY/TOWN <u>Richmond, Va</u>		
SIGN <u>Charles Snyder</u>	RESIDENCE <u>513 N 24TH ST</u>	<u>6/70/16</u>	<u>NA</u>
PRINT <u>CHARLES SNYDER</u>	CITY/TOWN <u>Richmond</u>		
SIGN <u>Sarah Grace Cheek</u>	RESIDENCE <u>513 N 29th St</u>	<u>6/10/16</u>	
PRINT <u>Sarah Grace Cheek</u>	CITY/TOWN <u>Richmond, VA</u>		
SIGN <u>Nolan Delago</u>	RESIDENCE <u>1265 Laver</u>	<u>6/10/16</u>	
PRINT <u>Nolan Delago</u>	CITY/TOWN <u>Richmond</u>		
SIGN <u>Pete Nunnally</u>	RESIDENCE <u>2108 E. Clay St</u>	<u>6/10/16</u>	
PRINT <u>Pete Nunnally</u>	CITY/TOWN <u>RVA 23220</u>		
SIGN <u>Reginald Wajid</u>	RESIDENCE <u>2301 Lamb ave</u>	<u>6/10/16</u>	
PRINT <u>Reginald Wajid</u>	CITY/TOWN <u>Richmond, VA 23222</u>		
SIGN <u>Quana White</u>	RESIDENCE <u>2309 Barton Ave</u>	<u>6/10/16</u>	
PRINT <u>Quana White</u>	CITY/TOWN <u>2322</u>		
SIGN <u>Wynia Haskins</u>	RESIDENCE <u>1800 Stockton St</u>	<u>6/10/16</u>	
PRINT <u>Wynia Haskins</u>	CITY/TOWN		
SIGN <u>MARION DAVIS</u>	RESIDENCE <u>1423 Williams Ave</u>	<u>6/10</u>	
PRINT <u>MARION DAVIS</u>	CITY/TOWN <u>Richmond, VA 23224</u>		
SIGN <u>Theodore James</u>	RESIDENCE		
PRINT <u>THEODORE JAMES</u>	CITY/TOWN		

Commonwealth of Virginia - AFFIDAVIT. FB4752950

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia; (ii) I am a legal resident of Richmond in the County/City/Town of Richmond; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I see the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE VA  
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE 1193  
CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PHOTOGRAPH, FULLY REPRODUCIBLE  
NOTARY SEAL STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION  
State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of June, 2016, by Alan Schintzius

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

Princetta Irene Clarke  
PRINT NAME OF PERSON CIRCULATING THE PETITION

NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*  
any notice The Code of Virginia §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate copying this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar when copying this document for public inspection, must cover the column containing social security number or part thereof.



Alan Schintzius LILI A

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN ENTER ABOVE, ZIP + 4  
MAYOR

ENTER ABOVE, OFFICE SOUGHT ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidate)

When an election district includes more than county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office

It is suggested that you file petitions in county to facilitate the processing of the filing. If you enter the number of signatures by congressional district enter district no. \_\_\_\_\_ (optional)

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is herein a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITION FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECURITY NUMBER (optional)
R 1.	SIGN	<u>[Signature]</u>	RESIDENCE <u>3321 Garland Ave</u>		
	PRINT	<u>Alan Schintzius</u>	CITY/TOWN <u>Richmond</u> <u>23222</u>		
R 2.	SIGN	<u>[Signature]</u>	RESIDENCE		
	PRINT		CITY/TOWN		
R 3.	SIGN		RESIDENCE		
	PRINT		CITY/TOWN		
R 4.	SIGN		RESIDENCE		
	PRINT		CITY/TOWN		
R 5.	SIGN		RESIDENCE		
	PRINT		CITY/TOWN		
R 6.	SIGN		RESIDENCE		
	PRINT		CITY/TOWN		
R 7.	SIGN		RESIDENCE	<u>5/11/16</u>	
	PRINT		CITY/TOWN		
R 8.	SIGN		RESIDENCE	<u>5/11/16</u>	
	PRINT		CITY/TOWN		
R 9.	SIGN		RESIDENCE		
	PRINT		CITY/TOWN		
R 10.	SIGN	<u>[Signature]</u>	RESIDENCE <u>401 Wilmersburg Rd</u>		
	PRINT	<u>Barbara Schintzius</u>	CITY/TOWN <u>Richmond</u> <u>23222</u>		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CHIK

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]		POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
11	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]		
12	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]		
13	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]	6/2/16	
14	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]		
15	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]		
16	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]		
17	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]	6/1/16	
18	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]		
19	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]	6/1/16	
20	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]		
21	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]	6/1/16	
22	SIGN [Signature] PRINT [Name]	RESIDENCE [Address] CITY/TOWN [City]		

Commonwealth of Virginia

**AFFIDAVIT.**

\_\_\_\_\_ swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I assented the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE

1193  
CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

~~CONFIDENTIAL - SECURITY INFORMATION~~

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of June, 2016, by

ALAN SCHULTZ

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate linking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without providing it. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing the social security number or part thereof.

Alan Schintzius L1

---

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)  
3321 Garland Ave

---

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

---

ENTER ABOVE, CITY/TOWN ENTER ABOVE, ZIP + 4  
MAYOR

---

ENTER ABOVE, OFFICE SOUGHT ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidate)

When an election district includes more than one county or city, it is suggested that you use separate petition forms for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office it is suggested that you file petitions in each county to facilitate the processing of the filing. If you enter the number of signatures by congressional or enter district no. (optional)

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the (check only one)

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 20 16 and we do further petition that his/her name be printed upon the official ballots to be used at the election

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is neither a legal resident of the United States of America and who is not a minor or a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that she personally witnessed the signature of each voter.

OFFICE USE ONLY	CIRCULATOR	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECURITY NUMBER (OPTIONAL)
P	1.	SIGN <u>[Signature]</u>	RESIDENCE <u>3417 Portman</u>		
	PRINT <u>Richard [Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	2.	SIGN <u>[Signature]</u>	RESIDENCE <u>3017 [Address]</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	3.	SIGN <u>[Signature]</u>	RESIDENCE <u>31 [Address]</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	4.	SIGN <u>[Signature]</u>	RESIDENCE <u>6321 [Address]</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	5.	SIGN <u>[Signature]</u>	RESIDENCE <u>6000 Rock Rd</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	6.	SIGN <u>[Signature]</u>	RESIDENCE <u>3021 [Address]</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	7.	SIGN <u>[Signature]</u>	RESIDENCE <u>1005 [Address]</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	8.	SIGN <u>[Signature]</u>	RESIDENCE <u>3135 [Address]</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	9.	SIGN <u>[Signature]</u>	RESIDENCE <u>1717 [Address]</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			
P	10.	SIGN <u>[Signature]</u>	RESIDENCE <u>17 [Address]</u>		
	PRINT <u>[Name]</u>	CITY/TOWN <u>Richmond VA 23222</u>			

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR 0452

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

NAME	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>[Signature]</u> PRINT <u>ANDREW THOMPSON</u>	RESIDENCE <u>1401 W. 10th St.</u> CITY/TOWN <u>Richmond, VA 23221</u>	<u>6-7-16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>1104 Campbell Ave</u> CITY/TOWN <u>Richmond</u>	<u>6-7-16</u>	
13	SIGN <u>[Signature]</u> PRINT <u>HAROLD FORTIN</u>	RESIDENCE <u>3025 Noble Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>6-7-16</u>	
14	SIGN <u>L. SHAWNEE HARVEY</u> PRINT <u>1805 STEELE AVE</u>	RESIDENCE <u>1805 STEELE AVE</u> CITY/TOWN <u>Richmond</u>	<u>6-7-16</u>	
15	SIGN <u>[Signature]</u> PRINT <u>NOE PETERSON</u>	RESIDENCE <u>312 East Broad St</u> CITY/TOWN <u>Richmond</u>	<u>6-7-16</u>	
16	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>3140 Brook Road</u> CITY/TOWN <u>Richmond</u>	<u>6-7-16</u>	
17	SIGN <u>[Signature]</u> PRINT <u>ELLEN M. A. ARNOLD</u>	RESIDENCE <u>4031 Cuthfield St</u> CITY/TOWN <u>Richmond</u>	<u>6-8-16</u>	
18	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>4031 Cuthfield St</u> CITY/TOWN <u>Richmond</u>	<u>6-8-16</u>	
19	SIGN <u>[Signature]</u> PRINT <u>Philadus Williams</u>	RESIDENCE <u>6827 Venable</u> CITY/TOWN <u>Richmond VA</u>	<u>6/8/16</u>	
20	SIGN <u>[Signature]</u> PRINT <u>Grace Al-Wazzan</u>	RESIDENCE <u>2600 Lamb Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>6/10/16</u>	
	SIGN <u>[Signature]</u> PRINT <u>James Rice</u>	RESIDENCE <u>2614 Canby Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>6-11-16</u>	

Commonwealth of Virginia

**AFFIDAVIT.**

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3371 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I issued the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of June 20 16, by

ALAN SCHINTZIUS  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

TV4252950

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

TYPE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

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Not to be used in seal stamp